

L16000084296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

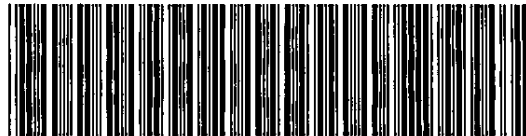
(Business Entity Name)

(Document Number)

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08/30/16--01005--009 **30.00

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2016 AUG 30 AM 11:56

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**K. SALLY
EXAMINER
AUG 31**

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AC Pro LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lawrence Raigrodski

Name of Person

Lawrence Raigrodski CPA

Firm/Company

5 Farm Haven Court

Address

Rockville/Maryland 20852

City/State and Zip Code

lmrepa@juno.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lawrence Raigrodski

301
at ()

230-2385

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AC Pro LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2016 AUG 30 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 04/28/16 and assigned
Florida document number L16000084296.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Mgr	Shai Tamam	4744 Timberglen Rd	☒ Add
		Suite 3218	☐ Remove
		Dallas, Tx. 75287	☐ Change
Mgr	Biniamin Ram	3429 NW 82 Terr	☐ Add
		Cooper City, Fl 33024	☒ Remove
			☐ Change
Mgr	Joseph Ceton	3379 NW 82 Terr	☐ Add
		Pembroke Pines, Fl 33024	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

FILED
2016 MAY 30 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 AUG 30 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 AUG 30 AM 11:56
SECHLARY OF STATE
TALLAHASSEE, FLORIDA

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated August 26, 2016

Signature of a member or authorized representative of a member

Biniamin Ram

Typed or printed name of signee